

 <p style="text-align: center;">STATE OF ALASKA DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES</p> <p style="text-align: center;">Policy and Procedure</p>	POLICY AND PROCEDURE NUMBER 07.02.010	PAGE 1 of 8
	EFFECTIVE DATE September 25, 2008	
SUBJECT Employee Housing		SUPERSEDES 20-1390
		DATED September 1, 1986
CHAPTER Maintenance and Operations	SECTION General Maintenance and Operations	APPROVED BY Signature on File

PURPOSE

This formalizes the policy and procedure (P&P) of the department on the rental, leasing and maintenance of state owned housing.

POLICY

It shall be the policy of the department to manage and maintain state owned housing intended for employee use in a manner consistent with respective union bargaining agreements and/or the Uniform Residential Landlord Tenant Act.

General Responsibilities:

1. The regional building maintenance manager will act as the leasing coordinator and is responsible for rental calculations, security deposits, coordinating rental collection actions and maintaining respective files.
2. Each regional building maintenance manager is responsible for the maintenance and operation of state owned housing in their respective region.
3. The Department of Administration (DOA)/Division of Personnel and Labor Relations (DOP&LR)/Department of Transportation and Public Facilities (DOT&PF) Service Center is responsible for deducting rents from employee/tenant payrolls which are automatically set up to transfer the revenues to the budget of the respective regional building maintenance manager.
4. The regional building maintenance manager is responsible for leasing of vacant state housing units to parties other than employees.
5. DOA/DOP&LR is responsible for coordinating all grievance proceedings related to state owned housing with the respective regional building maintenance manager.

6. State owned bunkhouse style housing is for the employee only. No family members, friends, or non employees are allowed to occupy state bunkhouses. Bunkhouses may not be occupied during non work days. Employees/tenants will lock their bunkhouse rooms whenever unoccupied.
7. State owned apartments and houses are for employees and their immediate families. These units have substantially higher rent, and are considered the employee's primary residence.

PROCEDURE

Employee Check-in: When an employee is assigned to state owned housing, the following procedures will apply:

1. The employee and a member of the regional DOT&PF facilities staff will make a joint inspection of the assigned housing. During the inspection, the "check-in" portion of the "State Housing Condition Inspection Record" and "Occupancy Notification and Agreement" forms will be prepared, signed, and forwarded to the regional building maintenance manager along with the employee's security and clean-up deposit (if applicable). Any received funds will be delivered to the regional finance office. A payroll deduction may be utilized in lieu of a cash deposit. Copies of the "State Housing Condition Inspection Record" and "Occupancy Notification and Agreement" forms are included with this P&P.
2. Upon receipt of the documentation above the regional building maintenance manager or designee will calculate the monthly rental payment in accordance with the respective union agreement for the type of housing assigned. The appropriate form will be forwarded to DOA/DOP&LR/DOT&PF Service Center to establish payroll deductions for the rent. The tenant will be notified of the amount of the payroll deduction.

Employee Check-out: When an employee vacates their state housing, the following procedures will apply:

1. The employee and a member of the regional DOT&PF facilities staff will make a joint inspection of the assigned housing. During the inspection, the "check-out" portion of the "State Housing Condition Inspection Record" and "Occupancy Termination Notification" forms will be prepared, signed, and forwarded to the regional building maintenance manager. A copy of the "Occupancy Termination Notification" form is included with this P&P.
2. The regional building maintenance manager will evaluate the "State Housing Condition Inspection Record" and determine if any refund is justified. If a refund is applicable, action will be taken to issue the employee all funds do.

Maintenance and Operation: Regional M&O facilities is responsible for all employee housing. Employee/tenant requests for maintenance of modifications will be forwarded to the regional building maintenance manager. The request will be evaluated for action. The employee/tenant will be informed of intended action, timeline for completion, or reason for disapproval of the request.

Failure of essential services such as water, sewer, electricity or heat for greater than 24 hours must be reported immediately to the regional building maintenance manager. They will determine if a temporary rent reduction is appropriate for the loss of the essential service(s) and initiate action with the DOA/DOP&LR/DOT&PF Service Center to implement the action.

Subletting Prohibited: Employees may not sublet any state owned housing.

Commercial Business Prohibited: Employees may not operate any commercial business in or from bunkhouse rooms. In state owned apartments or houses, employees and their families may not operate any commercial business from their housing.

Non-Employee Leases/Rentals: The regional building maintenance manager may lease or rent vacant apartments or houses to non-employees. Fees will be established based upon the respective local residential market rate at the time of the agreement. Bunkhouse rooms may not be leased or rented to non-employees as long as there are employees assigned to the bunkhouse. Prior to entering into an agreement under this section, the regional building maintenance manager will obtain concurrence from the regional M&O director in writing.

Grievances: All grievances arising from issues associated with state owned housing will be directed to the regional building maintenance manager. The regional building maintenance manager will coordinate management of the grievance with support from DOA/DOP&LR/DOT&PF Service Center.

Facility Condition Status: The regional building maintenance manager will track the condition of state housing. Improvements and refurbishment will be done as necessary. Assessment of current conditions will be done continuously to determine if rental rate should be adjusted.

Evictions: The regional building maintenance manager will be responsible for carrying out eviction actions with the assistance of DOA/Labor Relations and the Department of Public Safety/State Troopers (as applicable).

AUTHORITY

AS 34.03.010-380

IMPLEMENTATION RESPONSIBILITY

Maintenance and operations director, maintenance and operations chiefs

DISTRIBUTION

All department employees via the DOT&PF website

Department of Transportation and Public Facilities
2301 Peger Road
Fairbanks, AK 99709

OCCUPANCY NOTIFICATION AND AGREEMENT

TO: Facilities Office, Employee Housing Coordinator, 451-5210, fax 451-5263

FROM: _____
Employee/Tenant Social Security Number

Effective _____, 20____, I moved in to Housing Unit Number _____ Located at _____.

I acknowledge that the rental rate for the housing unit will be set in accordance with the terms of the bargaining unit agreement under which I am employed with the State of Alaska. I understand that **rental payments will be payable monthly in advance** and will be due on the first day of each month. I wish to make my rental payments by :

_____ Payroll Deduction

Any payments made by personal check or money order must be mailed to the above address in sufficient time to be received by the first day of the month.

At termination of occupancy any prepaid rent, less any cleaning charge, will be prorated and refunded to the employee according to the number of days the tenant occupied the unit.

In connection with my occupancy of the housing unit, I agree to the following conditions:

1. I will make no alterations, changes or repairs to the unit or State provided equipment without the prior approval of DOT&PF, Maintenance and Operations.
2. (a) If the unit is a single family dwelling unit, I understand that I will be responsible for normal household cleaning and light duty maintenance (change light bulbs, etc.).
(b) If the unit is in a bunkhouse, I will be responsible for keeping the area assigned to me clean and orderly. Any appliances installed in the facility, with the exception of televisions and stereo equipment must be pre-approved by Maintenance & Operations, Public Facilities section.
(c) If the unit is a trailer pad, I will be responsible for keeping the pad site clean and presentable.
3. I agree to be financially responsible for all loss or damage to the unit assigned to me, including DOT&PF furnished equipment, which is the result of carelessness, negligence, or abnormal use. At the termination of my occupancy, I will return the unit and furnishings to DOT&PF in at least as good a condition as when obtained upon occupancy, with the exception of normal wear and tear.
4. I will not sublet the unit or accept reimbursement from other persons for the use of the unit for any purpose.
5. I will not operate or permit any member of my immediate family to operate any business or other commercial enterprise in the unit or grounds without the prior written permission of the Commissioner of DOT&PF.
6. I agree to promptly report any damage or malfunctions to the unit or DOT&PF supplied equipment and any discontinuation of utility services. I understand that these reports should be made to the office designated by Regional Maintenance & Operations.
7. I understand that if my personal belongings occupy the housing unit, even though I am not residing there, I will be responsible for paying rent until my belongings are removed.

Deposits required: Bunkhouse = None

Trailer Pad, Mobile Home, House, Apartment = \$250

I have attached a check or money order (payable to: State of Alaska) to cover the applicable security deposit.

I hereby certify that the information entered on this form is true to the best of my knowledge:

Employee/Tenant Date

Foreman Date

Employee Housing Coordinator Date

10/2000

STATE OF ALASKA											
STATE HOUSING CONDITION INSPECTION RECORD										Page 1 of 2	
Location				Property Tag ID #				Department Unit #			
Department				Division				Date Assigned			
Name of Tenant				Social Security #				# Bedrooms _____ # Occupants _____			
Note: The following code letters are to be used in the check-in/out columns to denote current conditions. G=Good DU=Damaged R=Repair/Replace M=Missing											
Item	Check-In				Check-Out				Charges		
	1BR	2BR	3BR	4BR	1BR	2BR	3BR	4BR			
BEDROOMS	Ceilings										
	Walls										
	Floors										
	Windows and Shades										
	Light Fixtures/Outlets										
	Closets/Shelves										
	Doors										
Item	Check-In		Check-Out		Remarks						
KITCHEN	Ceiling										
	Walls										
	Floor										
	Windows and Shades										
	Light Fixtures/Outlets										
	Wall Cabinets										
	Base Cabinets										
	Closets										
	Shelves										
	Hot Water Heater										
	Sink										

STATE OF ALASKA						
STATE HOUSING CONDITION INSPECTION RECORD					Page 2 of 2	
	Item	Check-In	Check-Out	Remarks	Charges	
BATHROOM	Ceiling					
	Walls					
	Floor					
	Windows and Shades					
	Light Fixtures/Outlets					
	Accessories: shower rods, towel bars, soap dishes, etc.					
	Medicine Cabinet					
	Tub-Shower					
	Toilet					
	Door					
	Mirror					
EXTERIOR	Roof (single/plexes)					
	Siding					
	Porch and Railings					
	Steps					
	Window Screens					
	Door Screens					
	Grounds					
	Walks					
MISC.	Heater					
	Fuel Tank					
	Clothes Poles/Lines					
	Wannigan/Storage Room					
Total Charges						
CERTIFICATION						
Date Insp.	Check-In Inspector			Date Insp.	Check-Out Inspector	
	I hereby certify that the above check-in inspection (subject to comments in remarks column) represents a true record of the condition of the unit upon my initial occupancy and I, as the tenant, do agree to pay for damages incurred or items missing during my occupancy, reasonable wear and tear excepted, noted herein.				I hereby certify that the above check-out inspection (subject to comments in remarks column) represents a true record of the condition of the unit upon my vacating and I, as the tenant, do agree to pay for damages incurred or items missing during my occupancy, reasonable wear and tear excepted, noted herein.	
Signature of Check-In Inspector				Signature of Check-Out Inspector		
Signature of Tenant				Signature of Tenant		

STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION
EMPLOYEE HOUSING

OCCUPANCY TERMINATION NOTIFICATION

TO: NR Facilities Office, Employee Housing Coordinator
Department of Transportation & Public Facilities
2301 Peger Road
Fairbanks, AK 99709-5316

From: _____
Employee/Tenant Social Security Number

Effective _____, 20__, I vacated the Housing Unit Number _____

located at _____. An attempt will be made to include any
refund in your final paycheck. In the event this is not possible, please provide a
forwarding address below:

_____ Or, my home address on file with Human Resources.

Employee/Tenant's signature

Date

I verify the accuracy of this information and found the premises to be clean and undamaged
excluding normal wear and tear.

Foreman's signature

Date

Employee Housing Coordinator's signature

Date